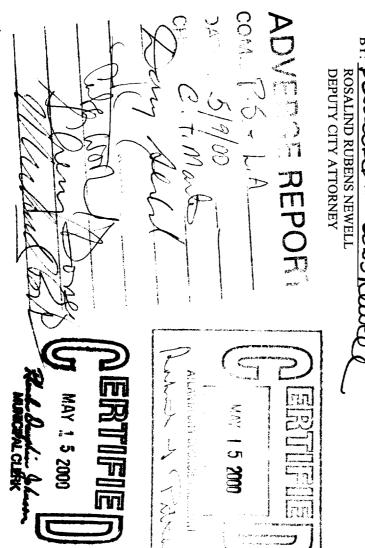
CL00L0164 - DIANNE C. MITCHELL Entered - 03/22/00 - sb

CLAIM OF: GLENDA R. WARWICK Ellijay, Georgia 30540 148 Logan Circle

result of a personal injury at the Atlanta Airport on October 11, 1999. For damages alleged to have been sustained as a

APPROVED THIS ADVERSED REPORT IS

ROSALIND RUBENS NEWELL Caralia Kusens Newel e



CINCEL MAY 1 5 2300



RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK

June 9, 2000

55 TRINITY AVENUE, S.W. SECOND FLOOR, EAST SUITE 2700 ATLANTA, GEORGIA 30335 (404) 330-6033 FAX (404) 658-6103

Glenda R. Warwick 148 Logan Circle Ellijay, GA 30540

00-R-0619

Dear Ms. Warwick:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on May 15, 2000. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the **City Attorney's Office/Claims Division at (404) 330-6400**.

Sincerely,

Rhonda Dauphin Johnson, CMC Municipal Clerk

cc: Claims Division/Law Department

## **DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY**

Claim No. <u>UULU164</u>	Date: <u>April 12, 2000</u>
Claimant /VictimGLENDA R. WARWICK	
BY: (Atty) (Ins. Co.)	
Address: 148 Logan Circle, Ellijay, Georgia 3	0540
Subrogation: Claim for Property damage \$	Bodily Injury \$ not stated
Date of Notice: 03/14/00 Method: Written,	proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X	Ante Litem (6 Mo.)
Date of Occurrence 10/11/99 Place:	Atlanta Airport
Department Aviation I	Division:
Employee involved I	Disciplinary Action:
NATURE OF CLAIM: The claimant alleges she was injured wh	nen she tripped on a broken grate at the Airport. The claim has
been forwarded to the City's insurance carrier, AIG Aviation, f	or handling.
INVESTIGATION:	
Statements: City employee Claimant	Others Written Oral
Pictures Diagrams Reports: Police	Dept Report Other
Traffic citations issued: City Driver	Claimant Driver
Citation disposition: City Driver	Claimant Driver
BASIS OF RECOMMENDATION:	
Function: Governmental X N	Ainisterial
Improper Notice More than Six Months	Other X Damages reasonable
City not involved Offer rejected Offer rejected	Compromise settlement
Repair/replacement by Ins. Co City Negligent City Negligent	Repair/replacement by City Forces
City NegrigentCity Negrigent	John Claim Abandoned
	Respectfully submitted,
	Respectiony submitted,
,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	( I have cutous
	INVESTIGATOR - DIANNE C. MITCHELL
/	
RECOMMENDATION: / /	
	$\neg$
	out charged: 1A012J012H01
Claims Manager: / //////////////////////////////////	Concur/date 04-/2 00
Committee Action:	Council Action
FORM 41	
FORM 23-61	

Mitchell 03/20/00 Du

					Charles of the control of the contro
COUNCIL OF THE	CITY OF ATLANT	A	RE: CLAIM FOI	RDAMAGES	/
MUNICIPAL CLERI					
City Hall		and the second s	Today's I	Date: <u>mARCH</u>	<u>13</u> 2000
55 Trinity Avenue, S Atlanta, Georgia 303	.W.	122.1			
Atlanta, Georgia 303		14	03-14-00 ENTERED - 3- 00L0164 - DI	POA · E	
Dear Municipal Cler	. <b>.</b> .	and the second s	ENTERED - 3-	-22-00 - SB	
Sea Madeipar Cier		1 2 34 LULE	00L0164 - DI	ANNE MITCHELL	
This is to notify the (	City of Atlanta that	t I have suffered d	lamages in the amount	sum of \$	nennetz
and/or\$ AmT. UNKI	VOWN bodily injur	v for which I cont	tend the City is liable.	3 <b>4</b> 111 01 <b>3</b>	property
1. Date of incident:	10/11/9	99	2. Police called:	: X	
	(month/day/ y	ye <b>ar</b> )		Yes No	•
3 1 4 4 4				Λ	
3. Location of incide	ent: <u>ATLANIA</u>	HIRPORT -	TOP FLOOR - SO	UTH PARKIN	U6 DECK
4 Name of your inc.		010		·	C59 #
T. Traditie of your first	rance company:	HEINH_		Policy N	o. <u>656060-55-55</u> 3
5. State what and he	w incident occurr	M. TRIDAZA	IN BROKEN	PAATE. S	W=0(C)
					BTHINED_
PERMANEN	IT INTURY	TO TWO	TNEERS ON RIG	SHT HOALD.	
			MODEL SOLVER	VIII IIIVIII	
6. ALLESTIMATES	S AND DAMAGES	ARE SUBJECT TO	OINSPECTION. THE	MAKING OF FA	LSECLAIMS WILL
6. ALLESTIMATES RESULT IN YOU	S AND DAMAGES R CLAIM BEING I	S ARE SUBJECT TO DENIED AND MA	O INSPECTION. THE AY RESULT IN CRIMI	MAKING OF FAI NAL PROSECUT	LSE CLAIMS WILL ION!
KESULI IN YOU	R CLAIM BEING	DENIED AND MA	AY RESULT IN CRIMI	NAL PROSECUI	IONI
7. The registered of	K CLAIM BEING I wner must make	the claim for ve	AY RESULT IN CRIMI Phicle damages, comp	NAL PROSECUT	TON!
7. The registered of	K CLAIM BEING I wner must make	the claim for ve	O INSPECTION. THE  AY RESULT IN CRIMI  chicle damages, comp  hicle (copy of the curre	NAL PROSECUT	TON!
7. The registered of repair	K CLAIM BEING I wner must make	the claim for ve	AY RESULT IN CRIMI Phicle damages, comp	NAL PROSECUT	TON!
7. The registered of	wner must make r and proof of owr	the claim for venership of your ve	AY RESULT IN CRIMING Phicle damages, comphicie (copy of the curre	NAL PROSECUT lete the following ent tag receipt or t	TONI  ng and attach two (2)  title).
7. The registered of repair	K CLAIM BEING I wner must make	the claim for ve	AY RESULT IN CRIMI Phicle damages, comp	NAL PROSECUT lete the following ent tag receipt or t	TON!
7. The registered of estimates of repair Your vehicle:	wner must make r and proof of owr	the claim for venership of your ve	AY RESULT IN CRIMING Phicle damages, comphicie (copy of the curre	NAL PROSECUT lete the following ent tag receipt or t	TONI  ng and attach two (2)  title).
7. The registered of repair	wner must make r and proof of owr	the claim for venership of your ve	AY RESULT IN CRIMING Phicle damages, composition of the curre (tag number)	NAL PROSECUT elete the following ent tag receipt or to (drive	TON!  ng and attach two (2)  citle).  er's name)
The registered of estimates of repair Your vehicle:	wner must make ar and proof of owr	the claim for venership of your ve	AY RESULT IN CRIMING Phicle damages, composition of the curre (tag number)	NAL PROSECUT elete the following ent tag receipt or to (drive	TONI  ng and attach two (2)  title).
The registered of estimates of repair Your vehicle:  City vehicle:	wner must make ar and proof of owr	the claim for venership of your ve	AY RESULT IN CRIMING Phicle damages, composition of the curre (tag number)	NAL PROSECUT elete the following ent tag receipt or to (drive	TON!  ng and attach two (2)  citle).  er's name)
The registered of estimates of repair Your vehicle:  City vehicle:	wner must make ar and proof of owr	the claim for venership of your ve	AY RESULT IN CRIMING Phicle damages, comphicie (copy of the curre (tag number)	NAL PROSECUT elete the following ent tag receipt or to (drive	TON!  ng and attach two (2)  nttle).  er's name)  nt/bureau)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:	wner must make r and proof of owr (make)  (make)	the claim for venership of your ve	AY RESULT IN CRIMIT Phicle damages, comp hicle (copy of the curre (tag number)  /s name)  (address)	olete the following that tag receipt or the definition of the department of the depa	ng and attach two (2) mitle).  er's name)  nt/bureau)  (telephone number)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:	wner must make r and proof of owr (make)  (make)  (name)  ment of this claim	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre  (tag number)  (address)	elete the following that tag receipt or the contract of the City o	ng and attach two (2) hitle).  er's name)  nt/bureau)  (telephone number)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:	wner must make r and proof of owr (make)  (make)  (name)  ment of this claim	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre  (tag number)  (address)	elete the following that tag receipt or the contract of the City o	ng and attach two (2) hitle).  er's name)  nt/bureau)  (telephone number)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in	(make)  (name)  ment of this claim tan admission of	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta	elete the following that tag receipt or the contract of the City o	ng and attach two (2) hitle).  er's name)  nt/bureau)  (telephone number)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in	(make)  (name)  ment of this claim tan admission of	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta	elete the following that tag receipt or the contract of the City o	ng and attach two (2) hitle).  er's name)  nt/bureau)  (telephone number)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state law, nor is in the state law.	(make)  (name)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta	elete the following that tag receipt or the contract of the City o	ng and attach two (2) hitle).  er's name)  nt/bureau)  (telephone number)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state law.	(make)  (mame)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta	elete the following that tag receipt or the contract of the City o	ng and attach two (2) hitle).  er's name)  nt/bureau)  (telephone number)
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state law.	(make)  (name)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	elete the following that tag receipt or the contract of the City o	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state law.	(make)  (mame)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	(driver)  (department)	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state law.	(make)  (mame)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	(driver)  (department)	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state of repair Your vehicle:	(make)  (mame)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	(driver)  (department)	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state of repair Your vehicle:	(make)  (mame)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	elete the following that tag receipt or leading to the City of and/or its employed claimant's name and	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state of repair Your vehicle:	(make)  (mame)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	(driver the following that tag receipt or the city of the City of and/or its employed (claimant's name (address)	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state of the sta	(make)  (make)  (make)  (make)  (make)  (make)  (make)  (name)  ment of this claim t an admission of libe mailed immed  R OR AFFIRM TH  IS TRUE AND CO	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	elete the following that tag receipt or leading to the City of and/or its employed claimant's name and	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state of the sta	(make)  (mame)  ment of this claim t an admission of libe mailed immed	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	(driver the following that tag receipt or the city of the City of and/or its employed (claimant's name (address)	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by ovee(s).
The registered of estimates of repair Your vehicle:  City vehicle:  Witness:  The acknowledge State law, nor is in the state of the sta	(make)  (make)  (make)  (make)  (make)  (make)  (make)  (name)  ment of this claim t an admission of libe mailed immed  R OR AFFIRM TH  IS TRUE AND CO	the claim for venership of your venership of you	ehicle damages, comphicle (copy of the curre (tag number)  (s name)  (address)  the Sovereign immunity of the City of Atlanta ess shown above.	(department of the City of and or its employed)  (claimant's name (address)  (city and state)	ng and attach two (2) citle).  er's name)  (telephone number)  Atlanta, as granted by oyee(s).